

KATTEN MUCHIN ZAVIS 525 West Monroe Street, Suite 1600 Chicago, IL 60661-3693 (312) 902-5200 Fax: (312) 902-1061 Attorney Docket No.: 112898.800/15105.00800 Customer No. 27160



Box PATENT APPLICATION Commissioner for Patents Washington, D.C. 20231

## Dear Commissioner:

Transmitted herewith for filing in the U.S. Patent and Trademark Office is the patent application of inventors, Graham DAVIS, Imants R. LAUKS, Chao LIN, and Cary James MILLER, entitled "Apparatus and Methods for Analyte Measurement and Immunoassay"

## Enclosed are:

above.

1. [X] Specification – <u>48</u> pages, including <u>62</u> claims, and an Abstract.
2. [X] Drawings – 17 sheets of drawings (including Figures 1-17).
3. [X] An Executed Combined Declaration and Power of Attorney.
4. [ ] Priority is claimed under 35 U.S.C. § 120 to, filed
5. [ ] Priority is claimed under 35 U.S.C. § 119 to U.S. Provisional Application No, filed
6. [ ] A Certified Copy of Patent Application No
7. [X] An Assignment from the inventors to I-STAT Corporation and the required Recordation Cover Sheet.
8. [ ] Applicants hereby claim Small Entity Status.
9. [X] The filing fee is calculated on the basis of the claims exiting in then application at 1

Claims as Filed, Less Any Claims Canceled by Amendment								
	(Col. 1)	(Col. 2)	SMALL ENTITY			OTHER THAN A SMALL ENTITY		
FOR:	NO. FILED	NO. EXTRA	RATE	FEE		RATE	FEE	
BASIC FEE	XXXXXX	XXXXXX	XXXXX	\$0	or	xxxxx	\$740	
TOTAL CLAIMS	62 – 20 =	42	χ=	\$0	or	x18=	\$756	
INDEP CLAIMS	7 – 3 =	4	χ=	\$0	or	x84=	\$336	
[ ] MULTIPLE DEPENDENT CLAIM PRESENTED			+140=	\$	or	+280=	\$	
If the difference in Col. 1 is less than zero, enter "0" in Col. 2.			TOTAL	\$0		TOTAL	\$1,832	

- 10. [ ] An Information Disclosure Statement with Form PTO-1449 and \_\_\_\_ patent references is enclosed.
- 11. [X] Please charge the filing fee due for this application to our Deposit Account No. 50-1710.
- 12. [X] The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application of credit any overpayment to deposit Account No. 50-1710. A duplicate copy of this sheet is attached.
  - [X] Any patent application processing fees under 37 CFR §§ 1.16 or 1.17.
  - [X] The issue fee set in 37 CFR § 1.18 at or before mailing of the Notice of Allowance, pursuant to 37 CFR § 1.31(b).
- 13. [X] Enclosed is a Return Post Card.

Telephone inquiries may be made to the Washington D.C. branch of Katten Muchin Zavis, to the undersigned at (202) 625-3500. Please address all correspondence to the address listed below (Customer No. 27160):

Respectfully submitted,

Corinne M. Pouliquen
Registration No. 35,753

Patent Administrator KATTEN MUCHIN ZAVIS 525 West Monroe Street, Suite 1600 Chicago, IL 60661-3693 FAX: (312) 902-1061

Dated:

3/5/02